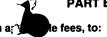
PART B-ISSUE FEE TRANSMITTAL

Complete and mail this form, together with an



Box ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231



MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

KENNETH SOLOMON HOWELL & HAFERKAMP 7733 FORSYTH BOULEVARD **SUITE 1400** LOUIS MO 63105

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

				El Hill		(Signature)
		PA	PARK OF ICE	May 3	2000	(Date)
APPLICATION NO.	FILING DATE	TOTAL CLAIMS	E	AMINER AND GROU	P ART UNIT	DATE MAILED
09/189,334	11/09/98	042	TUCKER, P		1712	03/28/00
rst Named POELKER,		35 US(C 154(b) t	erm ext. =	= 0 Day	
EOF		1. 1. m. w. w. pro- op post pro	p., ago, poor, groon groon, ago g			
ENTIONAQUEOUS EXTE	RNAL CRYSTAL	MODIFIER 1	DISPERSION			
•						
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
ATTY'S DOCKET NO. 1 6010-5989	CLASS-SUBCLASS		APPLN. TYPE UTILITY		FEE DUE \$1210.00	DATE DUE : 06/28/00
1% 6010-5989 Change of correspondence addre	507-090.	000 K35	UTILITY 2. For printing on the	NO	\$1210.00	06/28/00
1 6010-5989 Change of correspondence addre	507-090.	000 K35	UTILITY 2. For printing on the (1) the names of up	NO	\$1210.00	
	507-090 ass or indication of "Fee Addreser Number are recommended, b	000 K35 ss* (37 CFR 1.363). sut not required.	2. For printing on the (1) the names of up attorneys or agent the name of a si	NÜ ne patent front page, lis p to 3 registered pater	\$1210.00 st nt 1 HOWELL 8	06/28/00

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropiate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Houston, Texas

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual

corporation or other private group entity \Box government

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

- 4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):
- ☐ Issue Fee

and the names of up to 2 registered patent

attorneys or agents. If no name is listed, no

name will be printed.

☐ Advance Order - # of Copies _

4b. The following fees or deficiency in these fees should be charged to: 02-0429 DEPOSIT ACCOUNT NUMBER.

(ENCLOSE AN EXTRA COPY OF THIS FORM)

🖺 Issue Fee

Advance Order - # of Copies

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) Kenneth Solomon

NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE